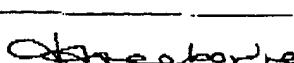


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No.0578 P. 3

JAN 17 2006

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number: MESH032
In re Application of	Phillip D. Neumiller	
Application Number	10/022,269	Filed December 20, 2001
For	SYSTEM AND METHOD FOR PERFORMING MACRO-DIVERSITY SELECTION AND DISTRIBUTION OF ROUTES FOR ROUTING DATA PACKETS IN AD-HOC NETWORKS	
Group Art Unit	2662	Examiner Hoa X. Nguyen
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.		
The requested extension and appropriate non-small-entity fee are as follows: (Check time period desired):		
<input checked="" type="checkbox"/>	One Month (37 CFR 1.17(a)(1))	\$ 120.00
<input type="checkbox"/>	Two Months (37 CFR 1.17(a)(2))	\$ 450.00
<input type="checkbox"/>	Three Months (37 CFR 1.17(a)(3))	\$ 1020.00
<input type="checkbox"/>	Four Months (37 CFR 1.17(a)(4))	\$ 1590.00
<input type="checkbox"/>	Five Months (37 CFR 1.17(a)(5))	\$ 2160.00
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and The resulting fee is \$ _____		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment to Deposit Account Number 502117		
<input checked="" type="checkbox"/> I have enclosed a duplicate copy of this sheet.		
I am the:		
<input type="checkbox"/> Applicant/inventor		
<input type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71.		
<input checked="" type="checkbox"/> Attorney or agent of record (Registration No.: 46,148 )		
<input checked="" type="checkbox"/> Attorney or agent under 37 CFR 1.34(a) Registration number if acting under 37 CFR 1.34(a) 46,148		
January 17, 2006		 Signature
Date		Randi L. Karpinna Type or printed name
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input checked="" type="checkbox"/> Total of 2 form(s) are submitted		
CERTIFICATE OF FACSIMILE TRANSMITTAL		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO to facsimile number 571-273-8300 or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313 on the date .		
Typed or printed name	Vernice V. Freebourne	Date: January 17, 2006
Signature		

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